#### APPLICATION FOR AN

## EXTENSION OF THE PROVISIONAL FOREIGN TEACHER TEACHING CERTIFICATE

#### ARIZONA DEPARTMENT OF EDUCATION - CERTIFICATION UNIT

Phoenix Office: P.O. Box 6490, Phoenix, AZ 85005-6490 Telephone: (602) 542-4367

This certificate is required for a teacher or professor from any foreign country, state, territory or possession of the United States contracted through the Foreign Teacher Exchange Program or other foreign teacher recruitment programs approved by the United States Department of State. It is issued in the areas of early childhood education, elementary education, secondary education, special education, and career and technical education. The Provisional certificate is valid for 1 year and may be extended 1 year.

#### **GENERAL INSTRUCTIONS AND INFORMATION:** Please submit the following:

- A. A photocopy of your valid Arizona Department of Public Safety Identity Verified Prints (IVP) fingerprint card (plastic).
- B. Completed application and a money order, cashier's check or personal check **ONLY** for the amount due, made payable to the Arizona Department of Education (**ADE**). Fees are **not** refundable. **Cash will not be accepted.**
- C. Consent verification letter of intent to hire from the contracting governing board, the education service agency, the charter holder, or the Arizona Board of Regents indicating grade level placement and school district signed by the district Superintendent or HR director.
- D. Official transcripts or *SEI Certificate of Training* verifying 3 semester hours or 45 clock hours of state approved Structured English Immersion (SEI) training.

	Date of Birth: _	/	Gender: M/F
(For identification pu			
'ull Legal Name:			
Last	First	Middle	
Iailing Address:			
Street Number or	P.O. Box City	State	Zip
<b>Celephone:</b> ()	Email Address:		Check box if you want to receive
(Home)		Home)	ADE updates via email.
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White (Not-Hispanic)	American Indian or Alaska		
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**SECTION 3: CRIMINAL HISTORY –** Answer every question, sign and date.

Applicant's Signature

ATTENTION:	f "YES" is indicated f	for any of the following	g questions, ple	ease <u>attach a ful</u>	l explanation to	this application, a
statement must be	provided with each a	pplication.				

1.	YESNO	Have you ever	had any professional certificate or lice	ense, revoked or susp	pended?
2.	YESNO	Have you ever	received a reprimand or other disciplin	nary action involvin	g any professional certification or
		license?			
3.	YESNO		been convicted of any felony offense?		
	YESNO		r been arrested for any offense for w		
5.	Have you ever	been arrested	for any of the <u>following</u> offenses in tl	his state or similar	offenses in another jurisdiction?
		YESNO	a Second-degree murder	YESNO	n Continuous sexual abuse of a child
		YES NO		YESNO	o Attempted first-degree murder
		125110	in serious physical injury or	YESNO	p Any other dangerous crime against
			involving the discharge, use		children as defined in section 13-
			or threatening exhibition of a		604.01
			deadly weapon or dangerous	YESNO	q Any of the above listed offenses if
			instrument against a minor		committed as a reparatory offense as
			under fifteen years of age		described in section 13-1001
		YESNO	c Sexual assault	YESNO	r Any offense causing you to register
		YES NO	d Molestation of a child		as a sex offender
		YESNO	e Sexual conduct with a minor	YES NO	s First-degree murder
		YES NO		YESNO	t Armed Robbery
			exploitation of a minor	YES NO	u Incest
		YES NO		YES NO	v Exploitation of minors involving
		YES NO			drug offenses
		YES NO		YES NO	w Sexual abuse of a
		YES NO			vulnerable adult
		YES NO		YES NO	
			of prostitution as prescribed in	TIPO NO	adult
		TIEG NO	section 13-3206	YES NO	y Commercial sexual exploitation of a
		YES NO	1 Child prostitution as	MEG NO	vulnerable adult
		VEC NO	prescribed in section 13-3212	YESNO	z Abuse of a vulnerable adult aa Molestation of a vulnerable adult
		YESNO	m Involving or using minors in drug offenses	YESNO	bb Neglect of a vulnerable adult
			drug offenses	YES NO	bb Neglect of a vullerable adult
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CEI					OFFENSE. I SWEAR OR AFFIRM THAT TH
					RPOSES IS, TO THE BEST OF MY KNOWLEDGE
					HEREIN PROVIDED PROVE TO BE FALSE,
					LINARY ACTION AGAINST ANY CERTIFICAT
			PARTMENT OF EDUCATION.	, -	

\*\* REQUIREMENTS MAY BE SUBJECT TO CHANGE AND ARE FULLY REFERENCED IN THE ARIZONA REVISED STATUTES AND ADMINISTRATIVE CODE. \*\*

Version 2.0 (Rev. 2-20-2014) 

www.AZED.Gov/CERTIFICATION 

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Date